

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	E.H.		10-02-01
O.I.P.E. CLASSIFIER		10	12-9-01
FORMALITY REVIEW	T.B.	JC 1108	10-25-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	1/30/02
2	2/3/02
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Claim	Date
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If more than 150 claims or 10 actions  
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